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| | Docket Number | CT-2645 NP |
| FILING BY "EXPRESS MAIL" UNDER 37 CFR 1.10 | | |
| EL 750821025 US | November 16, 2001 | |
| Express Mail Label Number | Date of Deposit | |

Address to: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

UTILITY PATENT APPLICATION TRANSMITTAL AND FEE SHEET

Transmitted herewith for filing under 37 CFR §1.53(b) is the utility patent application of

Applicant (or identifier): YU ET AL.

Title: HETEROCYCLIC SUBSTITUTED 2-METHYL-BENZIMIDAZOLE ANTIVIRAL AGENTS

Enclosed are:

1. ☒ Specification (Including Claims and Abstract) - 222 pages
2. ☐ Drawings - sheets
3. ☒ Executed Declaration and Power of Attorney (original or copy) **Informal/Unsigned**
4. ☐ Microfiche Computer Program (appendix)
5. ☐ Nucleotide and/or Amino Acid Sequence Submission
- ☐ Computer Readable Copy
- ☐ Paper Copy
- ☐ Statement Verifying Identity of Above Copies
6. ☐ Preliminary Amendment
7. ☐ Assignment Papers (Cover Sheet & Document(s))
8. ☐ English Translation of
9. ☐ Information Disclosure Statement
10. ☐ Certified Copy of Priority Document(s)
11. ☒ Return Receipt Postcard
12. ☒ Other: Specification Title Sheet

Filing fee calculation:

- ☐ Before calculating the filing fee, please enter the enclosed Preliminary Amendment.
- ☐ Before calculating the filing fee, please cancel claims .

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|---------------------------------------|-----------------------|-----------------|-----|-----------------|---|------|----|--------|-----|
| Basic Filing Fee | | | | | | | | \$ | 740 |
| Multiple Dependent Claim Fee (\$ 280) | | | | | | | | \$ | 0 |
| Foreign Language Surcharge (\$ 130) | | | | | | | | \$ | 0 |
| | For | Number Filed | | Number Extra | | Rate | | | |
| Extra Claims | Total Claims | 10 | -20 | 0 | x | \$ | 18 | = \$ 0 | |
| | Independent Claims | 3 | -3 | 0 | x | \$ | 84 | = \$ 0 | |
| TOTAL FILING FEE | | | | | | | | \$ | 740 |

- ☒ Please charge Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company in the amount of \$740. An additional copy of this paper is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.16 and §1.17 which may be required in connection with this application, or credit any overpayment, to Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company.

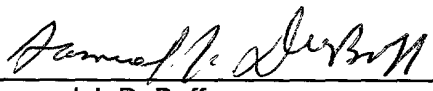
Please address all correspondence to the address associated with Customer No. 23914, which is currently:

Marla J. Mathias
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Please direct all telephone calls to the undersigned at the number given below, and all telefaxes to (203) 677-6900.

Respectfully submitted,

Date: 11/16/01



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